

Tufts Medical Center Lemuel Shattuck Hospital



Transitional Year Residency Program

Transitional Year Resident Duty Hours Policy

Effective: July 2011
Expiration: Indefinite

Purpose

This policy supplements and incorporates the Tufts Medical Center Graduate Medical Education Guidelines (GME 01-K) on Resident Duty Hours. This Policy is designed to establish Transitional Year policies and procedures governing resident duty hours, back-up support and on-call. This policy applies for all rotations at Lemuel Shattuck Hospital and affiliated hospitals where Transitional Year Residents perform duties.

Duty Hours/On-Call Activities

- a. Duty hours are defined as all clinical and academic activities related to the residency program, i.e., patient care (both inpatient and outpatient), administrative duties related to patient care, the provision for transfer of patient care, time spent in-house during call activities, and scheduled academic activities such as conferences. Duty hours do not include reading and preparation time spent away from the duty site
- b. Duty hours must be limited to 80 hours per week, averaged over a four-week period, inclusive of all in-house call activities.
- c. TY Residents must be provided with 1 day in 7 free from all educational and clinical responsibilities, averaged over a four week period, inclusive of call. One day is defined as one continuous 24-hour period free from all clinical, educational, and administrative activities.
- d. A -10 hour time period for rest and personal activities must be provided between all daily duty periods.
- e. Shift length must not exceed 16 hours.
- f. Night Float call should not include more than 6 (six) consecutive nights.
- g. Residents may remain on duty for up to 6 additional hours to participate in didactic activities, maintain continuity of medical and surgical care, transfer care of patients, or conduct outpatient continuity clinics.

Moonlighting

TY Residents-1 are prohibited to do moonlighting duty in-house (internal) or other hospitals (external).

Back-up Support

TY Residents are encouraged to request back-up support when the demands for their services are so burdensome or severe that the delivery of safe patient care is at risk. For all rotations and at all training sites, Back-up Support is provided by the Senior Resident (R3) and the designated team Attending during day call and by the Moonlighting Physician during night float call.

The use of back-up support will be monitored in order to determine any patterns or trends toward recommending scheduling or assignment changes to avoid the need for back-up.

OPD and **Elective** Rotations

During Outpatient rotation and electives Transitional Year Resident have no on-call responsibilities. However, in the case of emergency or other extenuating circumstances, Residents on a no-call rotation may be required to help with urgent coverage within the working hours policy limit. This coverage should not affect the required curriculum of the TY Resident and should not interrupt the continuity of patient care provided by the TY Resident.